10/27/2014 14:17

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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL Carol Shea-Porter for Congress				7	
	ox 453			_	
CITY, STATE, and ZIP CODE				-	
Rochester		NH 03866			
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (State and District)		4. FEC IDENTIFICATION NUMBER	
Carol Shea-Porter		House	NH 01	C00419978	
5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING		YES, IT AMENDS THE NOTICE FILED ON		//////	
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount
AMERICAN PHYSICAL THERAPY ASSOCIATION PHYSICAL THERAPY POLITICAL ACTION COMMITTEE (PT-PAC)				day, year)	2000.00
1111 N Fairfax St				10/23/2014	2000.00
		Transaction ID : VI	NVZQD76TW8		
Alexandria	VA 22314-1484	Occupation			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount
CONGRESSIONAL BLACK CAUCUS PAC				day, year)	
PO Box 70980				10/25/2014	2000.00
1 0 000 10300		Transaction ID : VNVZQD76TS4			
		Occupation			
Washington	DC 20024-0980				
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month, day, year)	Amount
JOHN LEWIS FOR CONGRESS					
PO Box 2323				10/25/2014	1000.00
-		Transaction ID : VNVZQD76TY4			
Atlanta	GA 30301-2323	Occupation			
D. FULL NAME, MAILING ADDRESS AND ZIP	CODE	Name of Employer		Date (month,	Amount
Ocean Champions PAC				day, year)	
000 0 1 1				10/25/2014	1000.00
202 San Jose Ave		Transaction ID : VI	W70D76W/2		
		Occupation ID: VI	1VZQD/6VV3		
Capitola	CA 95010-3239	Occupation			
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month, day, year)	Amount
		Occupation			
SIGNATURE (optional)		DATE		For further infe	ormation contact:
William Duncan		[Electronically Filed]		Federal Election Commission 999 E Street, NW, Washington, DC 20463	
					30, Local 202-694-1100

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